County: Wayne
Permit #: 5496
Driller: EAR/ MUSEley
Date drilling completed: 11-22-15

# **State Well Report**

Part 1 – **Driller's Log**Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225 (601)961- 5210

(601)961-5228 (fax)

For Office Use Only:
Aquifer:
well #: <u>P8)</u>
L. S. Elevation:
E-log #:

State Law requires that this report be prepared by the license holder responsible for the work and filed with the

Department at the above address within 30 days of comp	letion of drilling of the well or borehole.
Information on Well Owner	Well or Borehole Location
(Landowner if borehole is not for a water well)	Latitude: 31 . 37 . 26.8 Longitude 88 . 29 . 58.1 .!
Owner Name SHANNON CAVES	Method of Lat/Long (circle one): Conventional Survey,
Mailing Address: 1083 Jundan Sumpall	1 USGS quad Hand-neid GPS Survey-grade GPS
Buckatumans 3	NW 33 NW/4 SE 1/4 Sec 22 Twn 8 N. Rng 34-
City State Zip Code	Distance Direction Nearest Town
Telephone No. (61) 648 2184	9 Miles ( 957 of 129/22530n)
Well / Bore	hole Data
Date drilling started: 11-22/Bate drilling completed: 11-22	?-15 Hole depth: 80 Hole diameter: 4'
Location of the source of any surface water used for drilling: _83 Method of dosing and volume of Chlorine used in drilling and development.	opment: 422 HTH
Logs run (circle all applicable): No log run Electric Gamma Ray Name of organization running log(s):	Density Sonic Neutron Other:
Purpose of borehole (check one): Water Well X Geotechnical/Geological	ogical Investigation Ground Source Heat Pump
Seismic Survey Other (describe)  If drilling is not related to water well construction	) n, skip the remainder of this block
Purpose of Well (check one): Home X Industrial Public Supply	IrrigationFish CultureOther:
If a flowing well, method of flow regulation: Valve O	ther (describe)
Static Water Level: 40 feet above or below (circle one) la	and surface Date measured: 1/-22-15
Method of Measurement (circle one) <u>steel tape</u> electric tape	air line other:
Well depth: 75 Well grouted to a depth of 1/16 feet Type	of grout (circle one). Neat Cement Bentonite Mix
Casing length: 65 feet Casing diameter: 4''	
Screen length: 10 feet Screen diameter: 4''	inches Type of screen:
Screen slot size: # 8 inches Setting depth: From 6	feet to 75 feet
Type of completion (circle all applicable): Pravel packed Underr	reamed Telescoped Open hole Natural Development
Other (describe):	
Top of lap pipe or reduction in casing:feet. <u>If teld</u>	escoped or more than one screen, describe on next page

Form: OLWR-SWR-1A (04/08)

Ground Level
Fround Level

Description of Formations Encountered	From (depth)	To (depth)
TOP SOIL	Ground Level	1/
Rep SAND	;	8
2200 5000	8	12
Mes Brown Sons	12	15
mes Ison-	15	45
med/some	45	6.5
BRAY Kinesano	65	66
GRAY Kingsono	66	125
/		
		-
		<del></del>
		4
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	-	
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If more than one screen, show location of each on sketch

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well;
4) a north arrow.
WAYNESDOND HIT DYESS BRIDGE RO. 3 Miles TO
COUNTY LAKE DENHAM RO, ON RT GOTO ENDOK THE RD.
COUNTY LAKE DENAMIN IN U
TURN LEFT ON PENHAM PROGRESS RO GO IM. 12
Ola Tina
prive on LT In Pine Plation.
Landowner Name:
Form: OLWR-SWR-1A (04/08)

I certify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

## STATE WELL REPORT

# County: Why 22 Permit #: 549C Driller: £AN Museley Date completed: 11-22-15

## Part 2

### Pump Installer's Completion Report Mississippi Department of Environmental Quality

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225
(601)961-5210

For Office Use Only:			
Aquifer:			
well #: PSI			
Elevation:			

This part of the report must be completed by report must be attached and both parts filed	y a licensed water well c I with the Department at	ontractor or a license t the above address wi	d pump install thin 30 days o	er. A copy of well comple	f Part 1 of the tion.
Well Owner Information	Well Location				
Owner Name: SHANNEN CA	ves	Latitude: 31° 37	24.86 Lon	gitude: 88	29 58.11
Mailing Address: 1083 Jonba	Method of Lat/Long (check one): Conventional Survey,			i	
**************************************	USGS quad, Hand-held GPS, Survey-grade GPS NW 33 NW 35E 1/4 Sec 200 T 5MR 5m				
Buckatu.rra City State					
		Distance Di	rection	Nearest Town	1
Telephone No. (601) 648 2185	7	9 Miles Ex	95T_0f_4	syre	som
Pump Type		-	Power 7	[vne	<u> </u>
Circle one			Circle	* *	
Air Lift Jet <	Submersible	Diesel Engine	Gasoline En	gine	Natural Gas
Bucket Piston	Turbine	Electric Motor	Hand		Tractor PTO
Centrifugal Rotary	Flowing Well	Windmill	-	fy):	
Other (specify):	Horse Power Rating of Motor:				
Date Pump Installed: 1/-22-15		Setting Depth:	70	f	eet
Rated Pump Capacity:	Gallons Per Minute	Number of Stages: _	<b>3</b> 7		
Pump Test Data		Meth	od of Measur	ng Water L	evel
Date Well Tested:	_		Circle	one	
		Air Line Ele	ctric Measurin	g Line	Steel Tape
Static Water Level (A): 40 Feet F	Below Land Surface	Other (specify):			
Pumping Water Level (B): 700 Feet B	elow Land Surface				
Drawdown [(B) – (A)]: $30$ Feet E	Below Land Surface	For flowing well, m	easured shut in	head:	feet
Test Pumping Rate: 15	Gallons Per Minute	Well yieldedGPM with a drawdown of			
Duration of Pump Test (minimum 4 hours):	hours	fe	eet after	hou	rs of pumping
	ents are true to the best o				

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

FARI MOSE LET 5486

Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

Form: Ol WR-SWR-1B (04/08)

Form: OLWR-SWR-1B (04/08)